## Application Data Sheet

Application Information

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: PROCESS FOR THE CONTROLLED

REDUCTION OF THE SUGAR CONTENT

OF FRUIT JUICE AND DEVICE FOR

PRACTICING THIS PROCESS

Attorney Docket Number:: 0514-1142

Request for Early Publication?:: No Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: JEAN

Middle Name::

Family Name:: BONNET

Name Suffix::

City of Residence:: ANGERS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 16 RUE DESJARDINS

Address::

City of Mailing Address:: ANGERS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 49100

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: HERVE

Middle Name::

Family Name:: DE VILMORIN

Name Suffix::

City of Residence:: BORDEAUX

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 26 RUE POUDENSAN

Address::

City of Mailing Address:: ANGERS

Country of Maili	ng Address::	FRANCE		
Postal or Zip Co	de of Mailing A	ddress:: 33000		
Correspondence I	nformation			
Correspondence Customer		000466		
Number::				
Representative I	nformation			
Representative Customer		000466		
Number::				
Domestic Priorit	y Information			
Application::	Continuity	Parent	rent	
	Type::	Application::		Date::
Foreign Priority	Information			
Country::	Application	Filing Date::	Priority	
	Number::		Cl	aimed::
FRANCE	03 03372	3/19/03	Yes	
Assignment Infor	mation			
Assignee Name::				
Street of Mailin	g			
Address::				
City of Mailing	Address::			
State or Provinc	e of Mailing Ad	dress::		

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::